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3-15-04

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of)	FOR: MEMORY CONFIGURATION
)	FOR A WIRELESS
Inventor: GANTON, Robert Bruce)	COMMUNICATIONS DEVICE
)	
Serial No.: 10/085,773)	Group Art Unit: 2186
)	
Filed: February 26, 2002)	Examiner: PATEL, Hetul B.
)	
)	Attorney Docket No.: UTL 00080

AMENDMENT AND RESPONSE TO OFFICE ACTION

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Attention:
Examiner

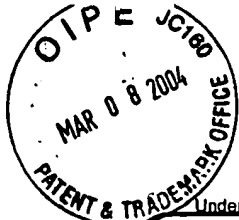
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Dear Sir:

This Amendment and Response to Office Action is submitted in response to the Office Action dated December 5, 2003, in the above-referenced patent application. Please enter the following amendments and consider the following remarks.



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2186

PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/085,773	
	Filing Date	February 26, 2002	
	First Named Inventor	GANTON, Robert Bruce	
	Art Unit	2186	
	Examiner Name	PATEL, Hetul B.	
Total Number of Pages in This Submission	24	Attorney Docket Number	UTL 00080

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return postcard
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	KATHLEEN L. CONNELL REG. NO. 45,344 KYOCERA WIRELESS CORPORATION
Signature	
Date	March 5, 2004

CERTIFICATE OF TRANSMISSION/MAILING			
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Typed or printed name	KATHLEEN L. CONNELL		
Signature		Date	March 5, 2004

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